

July 10, 2012  
**FOR IMMEDIATE RELEASE**

## Summary of June 7-8, 2012, Board Meeting

**The following is a summary of June 7-8, 2012, meeting of the Iowa Board of Medicine.**

**Cases Reviewed:** The Board reviewed 126 cases.

**New Investigative Cases:** The Board reviewed 52 new investigative cases.

**Statement of Charges:** Upon a determination by the Board that probable cause exists to take formal disciplinary action, the Board may file a Statement of Charges which contains the allegations of the Board.

The Board approved one Statements of Charges.

1. The Board charged an Iowa-licensed physician from Reno, Nevada, with violating the terms and conditions of a Board order. A hearing is scheduled on August 16, 2012.

**Combined Statement of Charges and Settlement Agreements:** Upon a determination by the Board that probable cause exists to take formal disciplinary action, the Board and the licensee may enter into a combined Statement of Charges and Settlement Agreement to resolve the matter. A combined Statement of Charges and Settlement Agreement contain the allegations of the Board and the sanctions.

The Board approved one Combined Statement of Charges and Settlement Agreement.

1. The Iowa Board charged an Iowa-licensed physician who formerly practiced general medicine in Bay City, Michigan with engaging in unethical or unprofessional conduct and for being disciplined by the Michigan Board of Medicine. The Board issued the physician a public reprimand and indefinitely suspended her Iowa medical license. Prior to seeking reinstatement of her Iowa medical license, Dr. Malik must pay a \$10,000 fine and complete a Board-approved professional ethics program.

**Settlement Agreements:** After the Board has determined that probable cause exists to take formal disciplinary action and formal disciplinary charges have been filed, the Board and the licensee may enter into a Settlement Agreement to resolve the pending disciplinary charges rather than hold a formal disciplinary hearing.

The Board approved three Settlement Agreements.

1. An Iowa-licensed physician who formerly practiced orthopedic surgery in Dubuque, Iowa, entered into a Settlement Agreement with the Board. On August 20, 2010, the Board filed formal disciplinary charges against the physician for failing to provide appropriate surgical care to several patients and for performing inappropriate physical examinations on a female patient. On September 20, 2010, the physician filed an answer denying the allegations. The physician retired from the practice of medicine on December 16, 2010, due to a diagnosis of cancer and other related health problems. The physician allowed his Iowa medical license to go inactive on October 1, 2011. Under the terms of the Settlement Agreement, the physician agreed not to renew his Iowa medical license in the future.
2. An Iowa-licensed physician who practices orthopedic surgery in Davenport, Iowa, entered into a Settlement Agreement with the Board. On August 25, 2011, the Board filed formal disciplinary charges against the physician for engaging in a pattern of unprofessional conduct and disruptive behavior including: unprofessional comments to staff and co-workers; inadequate patient evaluations; poor communication; improper surgical practices and improper record keeping. The Board also charged the physician with performing wrong-site surgery on a patient while performing an excision of a mass on a patient's right ring finger on March 28, 2011. Under the terms of the Settlement Agreement, the Board issued the physician a public reprimand for engaging in a pattern of disruptive conduct and for failing to provide appropriate care to patients in violation of the laws and rules governing the practice of medicine. The Board warned the physician that engaging in such conduct in the future may result in further disciplinary action, including suspension or revocation of his Iowa medical license. The Board ordered the physician to pay a \$10,000 fine for engaging in a pattern of disruptive conduct and a \$10,000 fine for performing wrong-site surgery. The physician was also required to submit a written corrective action plan describing the steps he has taken to avoid wrong-site surgery in the future. The physician also completed a psychological, unprofessional conduct and disruptive behavior evaluation and agreed to fully comply with the recommendations of the evaluation program. The physician also agreed to continue to participate in disruptive behavior counseling.
3. An Iowa-licensed physician who practices clinical cardiac electrophysiology in Davenport, Iowa, entered into a Settlement Agreement with the Board. On March 1, 2012, the Board charged the physician with violating a physician health contract that he entered into with the Iowa Physician Health Program (IPHP). The Board alleged that the physician failed to stop practicing medicine when requested to do so by the IPHP in August 2009 and consumed alcohol in December 2011. Under the terms of the Settlement Agreement, the physician was issued a public reprimand and ordered to pay a \$5,000 fine. The Board also placed the physician on probation for a period for five years subject to Board monitoring.

**Confidential Letters of Warning or Education:** When the Board determines that probable cause does not exist to take formal disciplinary action the Board may send a confidential, non-disciplinary letter to a licensee expressing concerns and requesting that a licensee take corrective action, including further medical education.

The Board voted to issue fourteen confidential Letters of Warning or Education due to the following areas of concern:

1. Failure to provide appropriate care to several patients.
2. Failure to timely diagnose and treat a patient with stroke symptoms.
3. Failure to timely diagnose and treat a patient with a ruptured spleen.
4. Prescribing medications to patients without performing an examination.
5. Performing an inappropriate procedure on a patient's eye.
6. Experiencing an unnecessary surgical complication.
7. Providing inappropriate care to a hospice patient.
8. A medication error.
9. Performing a procedure that resulted in unnecessary pain to a young child.
10. Possible illegal drug use.
11. Failure to timely diagnose and treat a testicular torsion.
12. Failure to rule-out pregnancy prior to an intrauterine device (IUD) placement.
13. Failure to provide complete and accurate information on a license application in another state.
14. Failure to provide appropriate supervision to a physician's assistant.

**Board Appearances:** The Board may ask a licensee to appear before the Board to discuss concerns when the Board determines that a face-to-face meeting will assist the Board during the investigative process.

The Board held three appearances.

**Monitoring Committee:** The Monitoring Committee monitors licensees who have been disciplined by the Board and require monitoring.

The Monitoring Committee reviewed thirteen cases.

**Screening Committee:** The Screening Committee reviews cases that are lower priority and have not been investigated by the Board to determine whether investigation is warranted.

The Screening Committee reviewed twenty three cases.

**Licensure Committee:** The Licensure Committee is a committee reviews initial license applications, renewals and reinstatements other licensure policies and issues. Most license applications are approved by Board staff without Licensure Committee review. However, some applications raise concerns about an applicant and the Licensure Committee must review the matter to determine whether a license should be granted, renewed or reinstated.

The Licensure Committee reviewed 9 licensure applications or requests to consider licensure options. Two permanent licenses were granted, two temporary licenses were granted, two resident licenses were granted, one applicant was asked to withdraw their application, and two applications were left open.

The Licensure Committee approved two Letters of Warning that were issued due to concerns that the applicants failed to provide truthful, accurate or complete information on the license application.

The Licensure Committee reviewed the Federation of State Medical Board's maintenance of licensure (MOL) proposed pilot projects and approved participation in four projects: state readiness inventory, communication about MOL and pilots, state board renewal process integration, and physician acceptability survey to assess MOL activities.

**Administrative rules:** The Board voted to adopt and file amendments for following administrative rules:

- 653 IAC Chapter 9, "Permanent Physician Licensure." The amendments update language throughout the chapter, apply the continuing education requirements for licensure reinstatement, and streamline the application process.
- 653 Chapter 10, "Resident, Special and Temporary Physician Licensure." The amendments update language throughout the chapter, apply the continuing education and training requirements for renewal of a special license, and raise the age of eligibility for a special license from 21 to 30.
- 653 Chapter 11, "Continuing Education and Training Requirements." The amendments update language throughout the chapter and recognize the continuing education gained by physicians from their service on the Board, on the Iowa Physician Health Committee, and by completing peer reviews for the Board.

These amendments will be published July 25, 2012, in the Iowa Administrative Bulletin and will become effective on August 29, 2012.

**Ad hoc committees appointed by Colleen Stockdale, M.D., Board chair:**

- Vice Chair Jeffrey Snyder, M.D., will head an ad hoc committee to review expectations for physicians who supervise physician assistants in the wake of a new law that decreases the physician-physician assistant supervisory ratio from 1-to-2 to 1-to-5.
- Joyce Vista-Wayne, M.D., will head an ad hoc committee to look into possible legislation that would expand the use of administrative law judges and alternate members in contested-case hearings.

**Other action:**

- The Board approved a 2013 fiscal year budget (July 1, 2012, through June 30, 2013) of \$3,671,280, up from \$3,233,783 in FY 2012.
- The Board recommended to Governor Branstad the appoint Analisa Haberman, D.O., and Siroos Shirazi, M.D., to the pool of alternate members.
- The Board authorized staff to pursue four pilot projects in cooperation with the Federation of State Medical Boards as a prelude to determining what may be required of physicians to demonstrate professional competence when seeking licensure renewal.

**A press release describing public disciplinary action taken by the Board was distributed and posted on the Board's Website on June 13, 2012. If you have questions about this summary or Board's disciplinary action press release, please contact Kent Nebel, Legal Director, at (515) 281-7088 or [kent.nebel@iowa.gov](mailto:kent.nebel@iowa.gov).**